



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Dobbs

In Re Application of: )  
William L. Betts )  
Serial No.: 09/766,255 ) Group Art Unit: 2634  
Filed: January 17, 2001 ) Examiner: David B. Lugo  
For: Tone Ordered Discrete Multitone Interleaver ) Docket No.: 061607-1361

**FIRST RESPONSE**  
**(WITH AMENDMENTS)**

RECEIVED

MAY 27 2004

Technology Center 2600

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Sir:

Applicant submits the following amendments and remarks to the non-final Office Action mailed from the United States Patent and Trademark Office on April 13, 2004 (Paper No. 3).

**AUTHORIZATION TO DEBIT ACCOUNT**

It is not believed that additional fees are required, beyond those which may otherwise be provided for in the documents accompanying this paper. However, in the event that additional fees are necessary to allow consideration of this paper, such extensions are hereby petitioned under 37 C.F.R. §1.136(a), and any fees required therefor (including fees for net additions of claims) are hereby authorized to be charged to Paradyne Corporation's Deposit Account No. 16-0255.



2634

<b>AMENDMENT TRANSMITTAL LETTER (LARGE)</b> Applicant(s): William L. Betts	Docket No. <b>061607-1361</b>
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Serial No. <b>09/766,255</b>	Filing Date <b>January 17, 2001</b>	Examiner <b>David B. Lugo</b>	Confirmation No. <b>8278</b>	Group Art Unit <b>2634</b>
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Invention: **Tone Ordered Discrete Multitone Interleaver**

Commissioner for Patents  
Mail Stop Amendment  
P.O. Box 1450  
Alexandria VA 22313-1450

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Transmitted herewith is First Response (with Amendments) in the above-identified application.  
The fee has been calculated and is transmitted as shown below

CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	31 -	33 =	0	X \$18.00	\$
INDEP. CLAIMS	5 -	5 =	0	X \$86.00	\$
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				\$145.00	\$
EXTENSION FEE	1 <sup>ST</sup> MONTH <input type="checkbox"/> 55.00	2 <sup>ND</sup> MONTH <input type="checkbox"/> 210.00	3 <sup>RD</sup> MONTH <input type="checkbox"/> 475.00	4 <sup>TH</sup> MONTH <input type="checkbox"/> 740.00	\$
Other Fees:					\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00

- ☒ No additional fee is required.
- ☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \_\_\_\_\_
- ☐ A check in the amount of \_\_\_\_\_ to cover the filing fee is enclosed. A duplicate copy of this page is enclosed.
- ☐ A Credit Card Payment Form PTO-2038 is attached in the amount of \$ \_\_\_\_\_
- ☒ The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 16-0255.

Karen G. Hazzah  
Karen G. Hazzah, Reg. No. 48,472

May 18, 2004  
Date